

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO 10/606500	FILED DATE
CLAIMS							APPLICANT(S)	
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1	1		1		1		31	
2		1		1		1	32	
3		1		1		1	33	
4		1		1		1	34	
5		1		1		1	35	
6		1		1		1	36	
7		1		1		1	37	
8		1		1		1	38	
9		1		1		1	39	
10	1		1		1		40	
11	1		1		1		41	
12		1		1		1	42	
13		2		1		1	43	
14		3		1		1	44	
15		1		1		1	45	
16	1		1		1		46	
17	1		1		1		47	
18		2		2		2	48	
19	1		1		1		49	
20		2		2		2	50	
21		3	1		1		51	
22		1		1		1	52	
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							100	
TOTAL IND.	6		8		8		TOTAL IND.	
TOTAL DEP.	24		16		16		TOTAL DEP.	
TOTAL CLAIMS	30		24		24		TOTAL CLAIMS	